

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		6-9-60
O.I.P.E. CLASSIFIER		21	6/11/60
FORMALITY REVIEW	4E	574	7/26/60
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	4/5/60
2	12/21/60
3	2/2/60
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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